



May 12, 2020

Ms. Molly Voris  
Senior Health Care Advisor  
Office of the Governor  
*Via Email: [molly.voris@gov.wa.gov](mailto:molly.voris@gov.wa.gov)*

Dear Ms. Voris:

While we appreciate the opportunity to partner with the acute care side of the health care delivery system, Washington Health Care Association, Adult Family Home Council, and LeadingAge Washington believe our models of care are distinctly different, although we recognize we are interdependent for capacity, patient census, right care location, and improve financial health.

As it pertains to COVID, for hospitals to fully resume operations and non-emergent surgeries, PPE supply will be further strained as competition for these limited and critically needed resources increases. Caution must be exercised so we don't disadvantage one or more health care sectors to favor elective surgeries. There must be a balance so all can move forward successfully and without sacrificing lives and quality of life for others. WHCA, LeadingAge Washington, and AFHC look forward to hospitals resuming elective surgeries; the post-acute care needs of these patients are exactly the patients we are ready and wanting to also serve. But we must have system readiness to do so safely for all. That means having adequate PPE and testing.

We recommend that the LTC sector work separately to develop a long term care plan for resuming "normal" operations in Washington state's skilled nursing, assisted living, and adult family home settings. We strongly believe that this plan must rely on data and science before opening our doors to visitors, social dining, and activities where residents and staff gather. We believe many, if not all, of the waivers in place today need to remain in place for at least two virus incubation cycles, or 28 days, following the start of phase four.

We also believe we need to examine local conditions so that increasing county COVID cases extends the visitor bans and allows distancing in meals and other activities along with required screening of all entering our facilities. Once the county COVID cases are at a level considered safe, facilities must be allowed to continue to impose reasonable restrictions on visitors and congregate meals and activities, and other limitations deemed necessary. These local decisions must be evaluated with an eye on testing and PPE preparedness to address new infections as they present.

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We would appreciate an opportunity to connect with you directly regarding this recommendation.  
Thank you in advance for your consideration

Sincerely,



Deb Murphy, MPA, JD  
Chief Executive Officer  
LeadingAge Washington



Robin Dale, JD  
Chief Executive Officer  
Washington Health Care  
Association



John Ficker  
Executive Director  
Adult Family Home Council